

APPENDIX E. SUMMARY OF CDC/HRSA STATE GRANT AWARDS

		Grant Amount	Total Paid	Balance
2006/07	Centers for Disease Control and Prevention Public Health Emergency Preparedness Program	\$ 16,551,200	\$3,682,748	\$12,868,452
2005/06	Centers for Disease Control and Prevention Public Health Emergency Preparedness Program	\$ 22,820,063	\$16,708,161	\$6,111,902
2004/05	Centers for Disease Control and Prevention - Public Health Preparedness & Emergency Response for Bioterrorism	\$ 24,257,730	\$ 23,585,960	\$671,770
2003/04	Centers for Disease Control and Prevention - Public Health Preparedness & Emergency Response for Bioterrorism	\$ 19,671,949	\$ 17,275,155	\$2,396,794
2001/03	Centers for Disease Control and Prevention - Public Health Preparedness & Emergency Response for Bioterrorism	\$ 19,626,686	\$ 19,626,686	\$0
2000/01	Centers for Disease Control and Prevention - Public Health Preparedness & Emergency Response for Bioterrorism	\$1,753,818	\$1,753,818	\$0
		\$ 104,681,446	\$ 82,632,528	\$22,048,918
		Grant Amount	Total Paid	Balance
2006/07	Health Resources and Services Administration - National Bioterrorism Hospital Preparedness Program	\$ 14,045,286	\$936,852	\$13,108,434
2005/06	Health Resources and Services Administration - National Bioterrorism Hospital Preparedness Program	\$ 12,439,858	\$5,366,876	\$7,072,982
2004/05	Health Resources and Services Administration - National Bioterrorism Hospital Preparedness Program	\$ 7,505,524	\$ 4,148,536	\$3,356,988
2003/04	Health Resources and Services Administration - National Bioterrorism Hospital Preparedness Program	\$ 12,089,422	\$ 11,265,406	\$824,016
2002/03	Health Resources and Services Administration - National Bioterrorism Hospital Preparedness Program	\$ 9,001,000	\$ 9,001,000	\$0
		\$ 55,081,090	\$30,718,670	\$24,362,420

Expenditures thru 01/17/07

Emergency Medical Services Authority

		Grant Amount	Total Paid	Balance
		\$ 180,000	\$0	\$180,000
2006/07	Centers for Disease Control and Prevention Public Health Emergency Preparedness Program			
		\$ 360,000	\$274,710	\$85,290
2005/06	Centers for Disease Control and Prevention Public Health Emergency Preparedness Program			
		\$ 330,000	\$ 330,000	\$0
2004/05	Centers for Disease Control and Prevention - Public Health Preparedness & Emergency Response for Bioterrorism			
		\$ 90,000	\$ 90,000	\$0
2003/04	Centers for Disease Control and Prevention - Public Health Preparedness & Emergency Response for Bioterrorism			
		\$ 960,000	\$ 694,710	\$265,290
		Grant Amount	Total Paid	Balance
		\$ 3,330,374	\$0	\$3,330,374
2006/07	Health Resources and Services Administration - National Bioterrorism Hospital Preparedness Program			
		\$ 2,244,190	\$0	\$2,244,190
2005/06	Health Resources and Services Administration - National Bioterrorism Hospital Preparedness Program			
		\$ 4,906,988	\$ 1,550,000	\$3,356,988
2004/05	Health Resources and Services Administration - National Bioterrorism Hospital Preparedness Program			
		\$ 6,005,054	\$ 5,181,038	\$824,016
2003/04	Health Resources and Services Administration - National Bioterrorism Hospital Preparedness Program			
		\$ 9,001,000	\$ 9,001,000	\$0
2002/03	Health Resources and Services Administration - National Bioterrorism Hospital Preparedness Program			
		\$ 25,487,606	\$ 15,732,038	\$9,755,568

Expenditures thru 01/17/07

Emergency Medical Services Authority Activities

EMSA State Grant Award (Continuation Page)

CDC funds are provided to EMSA to support Regional Disaster Medical Health Specialist (RDMHS) staff who assist LHDs in planning for receipt and dispensing of the contents of the Strategic National Stockpile (SNS), participate in the planning for placement of the CHEMPACK caches locally, support integration of the National Incident Management System (NIMS), assist in addressing medical and health response personnel credentialing issues, and support exercise activities for the annual Medical/Health and Golden Guardian exercises.

HRSA funds have been provided for the following activities:

Update and revise the Hospital Emergency Incident Command System (HEICS) Version III to incorporate the completion of the National Incident Management System (NIMS) Compliance Guidance and a HEICS user manual. Conduct regional training sessions for hospitals in the updated and newly developed systems.

Develop statewide guidelines, protocols and plans for establishing field treatment sites, to be established at the local level, at the hospitals, event site, or community-based sites within the impacted operational area.

Develop Emergency System for Advance Registration of Volunteer Health Professionals (ESAR/VHP) healthcare personnel registry and credentialing system with a multi-tiered process, working closely with licensing boards, professional associations, and major healthcare providers, targeting physicians, nurses, behavioral health professionals, and dentists.

Develop plans, templates, and guidelines for Medical Reserve Corps (MRC) teams to ensure consistent and collaborative programs, coordinated at the local, regional, and state level. The MRC will be consistent with and operate within California's Standardized Emergency Management System (SEMS), the state Citizen Corps program, and emergency management and public health systems.

Expand California Poison Control Center services to link with local and state terrorism surveillance efforts.

Establish a cache of medications for burn and trauma care and trauma care supplies and instruments. Working with the existing EMSA Trauma Advisory Committee, develop strategies for enhancing trauma and burn surge capacity during an emergency, and strategies for providing hospitals with equipment and supplies. Investigate mobile trauma units pre-positioned within the state to respond to an incident and augment trauma/burn care.

Enhance and expand ambulance strike teams to meet the HRSA benchmark for EMS capacity, including strike team communications. Investigate the need for and components of strike team caches of durable medical equipment and supplies for ambulance strike teams.

Enhance current hospital communication systems and establish communication linkages with hospitals in dispatch centers and ambulance providers.

California Department of Health Services

		Grant Amount	Total Paid	Balance
2006/07	Centers for Disease Control and Prevention Public Health Emergency Preparedness Program	\$ 16,371,200	\$3,682,748	\$12,328,452
2005/06	Centers for Disease Control and Prevention Public Health Emergency Preparedness Program	\$ 22,460,063	\$16,433,451	\$5,666,612 **
2004/05	Centers for Disease Control and Prevention - Public Health Preparedness & Emergency Response for Bioterrorism	\$ 23,767,730	\$ 23,155,960	\$611,770 *
2003/04	Centers for Disease Control and Prevention - Public Health Preparedness & Emergency Response for Bioterrorism	\$ 19,541,949	\$ 17,145,155	\$2,396,794 *
2001/03	Centers for Disease Control and Prevention - Public Health Preparedness & Emergency Response for Bioterrorism	\$ 19,626,686	\$ 19,626,686	\$0
2000/01	Centers for Disease Control and Prevention - Public Health Preparedness & Emergency Response for Bioterrorism	\$1,753,818	\$1,753,818	\$0
		\$ 103,521,446	\$ 81,797,818	\$21,003,628
		Grant Amount	Total Paid	Balance
2006/07	Health Resources and Services Administration - National Bioterrorism Hospital Preparedness Program	\$ 10,484,912	\$936,852	\$9,548,060
2005/06	Health Resources and Services Administration - National Bioterrorism Hospital Preparedness Program	\$ 9,870,668	\$5,337,368	\$4,533,300
2004/05	Health Resources and Services Administration - National Bioterrorism Hospital Preparedness Program	\$ 2,298,536	\$ 2,298,536	\$0
2003/04	Health Resources and Services Administration - National Bioterrorism Hospital Preparedness Program	\$ 6,084,368	\$ 6,084,368	\$0
2002/03	Health Resources and Services Administration - National Bioterrorism Hospital Preparedness Program	\$ -	\$ -	\$0
		\$ 28,738,484	\$14,657,124	\$14,081,360

Funds contracted with EMSA and DMH shown separately.

*Remaining funds in encumbered contracts.

**Carryover of \$1.9 million is reflected in the 2005/06 grant award, remaining \$400,000 will be carried forward upon submission of final 2004/05 FSR.

Expenditures thru 01/17/07

California Department of Health Services Activities

CDHS State Grant Award (Continuation Page)

From 2001-2004, CDC required CDHS to address seven focus areas: preparedness and planning; surveillance and epidemiology; biologic agent laboratory capacity; chemical agent laboratory capacity; communications and information technology; risk communications; and education and training. In 2005, the focus areas changed to outcome oriented goals focused on preventing, detecting/reporting, investigating, controlling, recovering and improving our response.

Additionally, California's CDC grant includes funds earmarked for three specific activities:

Chemical Laboratory:

CDC allocates funds for CDHS to maintain a state-of-the-art chemistry laboratory to test for bioterrorism agents and other toxic chemicals in human samples. Presently, only five states receive funds to support laboratories to test for chemicals in human samples and CDHS is the only state health department on the West Coast to have this capacity.

Early Warning Infectious Disease Surveillance (EWIDS)

CDC allocates funds for the four states that border Mexico to monitor and detect infectious diseases through surveillance and laboratory testing at the U.S. - Mexico border. EWIDS is the only area of the CDC cooperative agreement where activities are restricted to biological agents that could be used for terrorism. CDHS coordinates EWIDS activities with state and local health officials and health professionals, the Mexican government, and state health departments in Texas, New Mexico, and Arizona.

Cities Readiness Initiative (CRI)

In 2004, CDC started the CRI program which is directed at providing antibiotics to the entire population of an urban area within 48 hours of detection of an aerosolized anthrax attack. In 2004, health departments in the 21 largest urban areas in the United States received CRI funding; in California, this included San Francisco, San Diego, and Los Angeles County Health Departments. In 2005, CDC expanded CRI funding to additional urban areas. In addition to the Los Angeles Department of Health Services, 16 LHDs are involved in CRI. The Orange County Health Department and five LHDs in the San Francisco Bay Area were added as "collar counties" surrounding two of the original three CRI LHDs. Additionally, two areas involving counties near Sacramento and San Jose were funded to plan for future CRI activities.

CDC PANDEMIC INFLUENZA GRANT FUNDS

In 2006-2007 CDHS allocated \$4.5 million in federal funds to 58 LHDs to support public health pandemic influenza emergency preparedness. LHDs created plans that addressed the following pandemic influenza specific priority Target Capabilities: Pandemic Planning, Mass Prophylaxis, Isolation and Quarantine, Medical Surge and Planning for Alternate Care Sites, and Communication. In addition to these federal funds, CDHS allocated \$11.5 million in state General Fund dollars provided by the California Budget Act of 2006-07 for pandemic preparedness. These funds are not included in this report.

HRSA

From 2002-2006 HRSA required California to address critical benchmarks within six priority areas. These benchmarks included administration; regional surge capacity; emergency medical services triage, transportation, and patient tracking; linkages between hospital laboratories and local health department laboratories; education and preparedness training; and terrorism preparedness exercise. In 2006-2007, HRSA changed from benchmarks to target capabilities that address Personnel, Planning, Equipment and Systems, Training, and Exercises.

Department of Mental Health

		Grant Amount		Total Paid	Balance
		\$	160,000	\$ 100,000	\$60,000
2004/05	Centers for Disease Control and Prevention - Public Health Preparedness & Emergency Response for Bioterrorism				
		\$	40,000	\$ 40,000	\$0
2003/04	Centers for Disease Control and Prevention - Public Health Preparedness & Emergency Response for Bioterrorism				
		\$	200,000	\$ 140,000	\$60,000
		Grant Amount		Total Paid	Balance
		\$	230,000	\$0	\$230,000
2006/07	Health Resources and Services Administration - National Bioterrorism Hospital Preparedness Program				
		\$	325,000	\$29,508	\$295,492
2005/06	Health Resources and Services Administration - National Bioterrorism Hospital Preparedness Program				
		\$	300,000	\$ 300,000	\$0
2004/05	Health Resources and Services Administration - National Bioterrorism Hospital Preparedness Program				
		\$	855,000	\$ 329,508	\$525,492

Department of Mental Health Activities

Expenditures thru 01/17/07

The Department of Mental Health received both CDC and HRSA funds to conduct a statewide assessment to determine the capabilities, vulnerabilities and unmet needs of the mental health system capacity to respond to bioterrorism events, as well as address readiness for other types of terrorism events including chemical, biological, radiological, nuclear and explosive (CBRNE).

Based on the assessment results, DMH developed a training curriculum for mental health personnel on mental health response to bioterrorism and other emergency incidents. Training will include but is not limited to:

1. disaster mental health practices and systems of care,
2. crisis intervention and crisis management,
3. bioterrorism agents and response protocols,
4. emergency management system and protocols,
5. stress management and self-care for health care providers, their families, first responders, and the public.

DMH will conduct regional training sessions for hospitals and clinics in the updated and newly developed systems.